

## Instructions for Application Form for SWCV Incentives

Please review the Solid Waste Collection Vehicle (SWCV) Incentive Guidelines prior to completing the Application Form. The Guidelines are available on the Air District website at [www.baaqmd.gov](http://www.baaqmd.gov). Click on *Grant & Incentives*, and then click on *Refuse Truck Incentives*.

- All applications must be submitted by a public agency located within the jurisdiction of the Air District.
- Incentives are available to reduce NO<sub>x</sub> emissions from public and private SWCVs that are subject to the California Air Resources Board SWCV regulation.

To apply for SWCV Incentives, please submit the following:

- 1) A **fully executed Resolution** endorsing the application, adopted by the public agency governing board (e.g., City Council). The Resolution may be submitted with the initial Application Form. The Resolution must be submitted within 30 calendar days of the initial date that the sponsor submits the Application Form. If the public agency fails to submit the executed Resolution within 30 days, the SWCV incentive award may be cancelled by the Air District. A sample Resolution is available on the Air District website (see above.)
- 2) Completed **SWCV Incentive Application Form**. Incomplete applications will not be accepted.

Part 1 should be completed and signed by the public agency sponsor.

Part 2 should be completed and signed by the SWCV fleet.

Part 3 should be completed only if funds are requested to install retrofit devices on existing trucks.

Part 4 should be completed only if funds are requested to purchase new natural gas refuse trucks.

Incentive funds will be allocated, on a first-come, first-served basis.

All applications must be submitted via US Postal Service mail. Applications will not be accepted via fax, email, or hand-delivery.

Applications must be postmarked December 15, 2004 or later. (Applications postmarked prior to December 15, 2004 will be returned to the applicant for resubmittal.)

Applications should be submitted to:

**David Burch**  
**BAAQMD**  
**939 Ellis St.**  
**San Francisco, CA 94109**

# APPLICATION FORM - SWCV INCENTIVES - PART 1

## PUBLIC AGENCY SPONSOR INFORMATION

Public Agency Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ Zip \_\_\_\_\_

## CONTACT PERSON

Name: \_\_\_\_\_ Title: \_\_\_\_\_ Position: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## INCENTIVE AMOUNT REQUESTED

Incentive Amount Requested for Retrofit Devices: \_\_\_\_\_ (complete Part 3)

Incentive Amount Requested for Natural Gas Trucks: \_\_\_\_\_ (complete Part 4)

Subtotal: \_\_\_\_\_

Administrative costs (optional) \*: \_\_\_\_\_

Total Incentive Amount Requested: \_\_\_\_\_

*(Administrative costs are limited to 5% of Subtotal line, to a maximum of \$5,000.)*

## FRANCHISE AGREEMENT

Describe franchise agreement with SWCV fleet owner/operator. Describe service provided and geographic area served. Provide date that current franchise agreement with SWCV fleet will expire.

Is adopted Resolution from governing board attached?

If not, provide date that governing board will adopt Resolution:

## NAME / TITLE OF INDIVIDUAL WHO WILL SIGN INCENTIVE FUNDING AGREEMENT

\_\_\_\_\_

## AUTHORIZED SIGNATURE FOR PUBLIC AGENCY

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

## APPLICATION FORM – SWCV INCENTIVES – PART 2

### INFORMATION ON SOLID WASTE COLLECTION VEHICLE FLEET

Name of SWCV Fleet Owner/Operator: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_ Position: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Describe SWCV service provided:

Specify the geographic area(s) served by the SWCVs for which incentive funding is requested:

*By signing this application form, SWCV fleet owner/operator agrees to operate all SWCVs equipped with retrofit devices, as specified in Part 3, using ultra-low-sulfur diesel fuel at all times.*

### AUTHORIZED SIGNATURE FOR SWCV FLEET \*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\* Must be signed by Executive-level staff.

## APPLICATION FORM - SWCV INCENTIVES – PART 3

### INCENTIVES FOR RETROFIT DEVICES

Incentives are available to install retrofit devices on existing trucks. Only Level 3 retrofit devices certified by CARB to reduce PM emissions by 85% and NOx emissions by 25% are eligible for funding. As of November 2004, the Cleaire Longview system is the only device that meets these criteria. Cleaire Longview devices may only be installed on engines and model years cited in Attachment 1 of Executive Orders DE 03-001-03 and DE 04-004-02, as issued by the California Air Resources Board (CARB) on July 16, 2004.

See <http://www.arb.ca.gov/diesel/verdev/level3.htm>.

Trucks equipped with retrofit devices must use ultra-low-sulfur diesel (ULSD) at all times.

**Describe ULSD supplier and site(s) where trucks will be fueled with ULSD:**

A) Total # of Retrofit Devices to be installed: \_\_\_\_\_

B) Total funds requested for retrofit devices: \_\_\_\_\_

(B = A x \$10,500 per device)

For each truck, provide the following information in the table below.

Truck VIN #	Engine Serial #	Engine Model	Engine Year

(Insert additional lines in table above, as necessary.)

## APPLICATION FORM - SWCV INCENTIVES – PART 4

### INCENTIVES FOR NEW HEAVY-DUTY NATURAL GAS TRUCKS

The Air District will provide up to the maximum incentive amounts specified below for new trucks. The incentive amount requested should be based upon the incremental cost of the natural gas truck, as explained below. Trucks must be equipped with natural gas engines that achieve one of the optional CARB low-NO<sub>x</sub> standards. (For details, see SWCV Incentive Guidelines.)

Maximum incentive levels based on CARB certification level (NMHC + NO<sub>x</sub>)

1.8 gr/bhp-hr – maximum incentive amount = \$30,000

1.5 gr/bhp-hr – maximum incentive amount = \$45,000

1.2 gr/bhp-hr – maximum incentive amount = \$60,000

Describe new SWCVs to be purchased in table below (one vehicle per row)

Truck Manufacturer	Engine Make/Model Year	Engine Family	Fuel Type	CARB Certification Level (NMHC + NO <sub>x</sub> )	Incentive Amount Requested *
TOTAL					

**Incentive Amount Justification:** The Air District will provide funding to cover the incremental cost of the new natural gas truck (compared to the cost of a new diesel-powered truck), up to the maximum incentive amount shown above. Documentation to justify the incremental cost will be required as part of the invoice for payment.

\* *Explain the basis for the incentive amount requested above in the space below:*